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APPLICANTS

Jody Riesberg, Lincolnshire, IL;

Jeffrey S. Kordell, Itasca, IL;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

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** 04/29/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IL	SHEETS DRAWING 3	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

ADDRESS

David M. Mundt
 Cook, Alex, McFarron, Manzo,
 Cummings & Mehler, Ltd.
 200 West Adams Street, Suite 2850
 Chicago, IL
 60606

TITLE

Side sleeping pillow

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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